



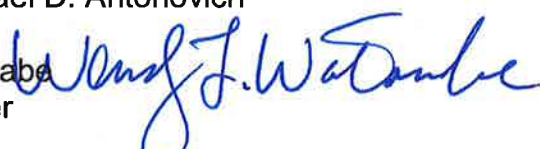
**COUNTY OF LOS ANGELES
DEPARTMENT OF AUDITOR-CONTROLLER**

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WENDY L. WATANABE
AUDITOR-CONTROLLER

June 4, 2013

TO: Supervisor Mark Ridley-Thomas, Chairman
Supervisor Gloria Molina
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

FROM: Wendy L. Watanabe
Auditor-Controller 

SUBJECT: **EI CENTRO DEL PUEBLO – A DEPARTMENT OF MENTAL HEALTH
CONTRACT SERVICE PROVIDER – PROGRAM REVIEW**

We completed a contract compliance review of El Centro del Pueblo (El Centro or Agency), which included a sample of billings from November and December 2011. The Department of Mental Health (DMH) contracts with El Centro to provide mental health services, including interviewing program clients, assessing their mental health needs, and implementing treatment plans. The purpose of our review was to determine whether El Centro provided the services and maintained proper documentation, as required by their County contract.

DMH paid El Centro approximately \$700,000 on a cost-reimbursement basis for Fiscal Year 2011-12. The Agency provides services to residents of the First Supervisorial District.

Results of Review

El Centro staff had the required qualifications to provide DMH Program services. However, El Centro did not maintain documentation to support \$1,222 in billings, and needs to improve the quality of documentation in their Assessments, Client Care Plans, Progress Notes, and Informed Consents to fully comply with their DMH contract. Specifically, El Centro:

- Did not maintain sufficient documentation to support five (14%) of the 35 billings reviewed.

- Did not describe the clients' symptoms and behaviors consistent with the Diagnostic and Statistical Manual of Mental Disorder to support the diagnosis in four (27%) of the 15 Assessments reviewed.
- Did not develop specific or measurable objectives in the Client Care Plans for three (20%) of the 15 cases reviewed.
- Did not develop objectives that related to clients' needs identified in their Assessments for three (20%) of the 15 Client Care Plans reviewed.
- Did not document that clients were questioned about side effects and/or clients' compliance with their medication regime for four (40%) out of ten Medication Support Service Progress Notes reviewed.
- Did not obtain Informed Consent forms for six (75%) of the eight clients who received treatment with psychotropic medication.

El Centro's attached response indicates that the Agency will repay DMH the \$1,222, and will modify their documentation procedures to ensure that their Assessments, Client Care Plans, Progress Notes, and Informed Consents are completed in accordance with the DMH contract requirements.

Details of our review, along with recommendations for corrective action, are attached.

Review of Report

We discussed our report with El Centro and DMH. El Centro's attached response indicates that they agree with our findings and recommendations. DMH will work with El Centro to ensure that our recommendations are implemented.

We thank El Centro management for their cooperation and assistance during our review. Please call me if you have any questions, or your staff may contact Don Chadwick at (213) 253-0301.

WLW:AB:DC:EB

Attachment

c: William T Fujioka, Chief Executive Officer
Dr. Marvin J. Southard, Director, Department of Mental Health
Conrado Terrazas, Chairperson, Board of Directors, El Centro
Sandra Figueroa-Villa, Executive Director, El Centro
Public Information Office
Audit Committee

**EL CENTRO DEL PUEBLO
DEPARTMENT OF MENTAL HEALTH
FISCAL YEAR 2011-12**

BILLED SERVICES

Objective

Determine whether El Centro del Pueblo (El Centro or Agency) provided the services billed to the Department of Mental Health (DMH) in accordance with their DMH contract.

Verification

We selected 35 billings from 436 approved Medi-Cal billings for November and December 2011, which were the most current billings available at the time of our review (September 2012). We reviewed the Assessments, Client Care Plans, Progress Notes, and Informed Consents in the clients' charts for the selected billings. The 35 billings represent services provided to 15 clients.

Results

El Centro did not maintain documentation to support five billings, totaling \$1,222. Specifically, the Agency billed for:

- Four billings totaling \$1,018 in which the Progress Notes did not describe what the clients or service staff attempted and/or accomplished towards the Client Care Plan objectives.
- One billing in which the Agency did not prorate staff time between group participants resulting in an overbilling of \$204.

Assessments

El Centro did not adequately describe the clients' symptoms and behaviors consistent with the Diagnostic and Statistical Manual of Mental Disorder (DSM) to support the diagnosis in four (27%) of the 15 Assessments reviewed. The DSM is a diagnostic manual published by the American Psychiatric Association for mental health professionals, which lists different categories of mental disorder and the criteria for diagnosing them. The DMH contract requires the Agency to follow the DSM when diagnosing clients.

Client Care Plans

El Centro did not complete some elements of five (33%) of the 15 Client Care Plans in accordance with their DMH contract. Specifically:

- Three Client Care Plans did not contain specific or measurable objectives. This finding was also noted during our prior monitoring review.
- Three Client Care Plans did not contain objectives that related to the presenting problem, diagnosis, or functional impairment documented in the Assessments.

The number of incomplete Client Care Plans in the examples above exceeds the number of Client Care Plans noted with exceptions because one Client Care Plan contained more than one deficiency.

Progress Notes

Four (40%) of the ten Medication Support Services Progress Notes were not completed in accordance with the DMH contract. Specifically, the Progress Notes did not indicate that the clients were questioned about side effects, and/or clients' compliance with medication regime. This finding was also noted during our prior monitoring review.

Informed Consent

El Centro did not obtain Informed Consent forms for six (75%) of the eight clients sampled, who received treatment with psychotropic medication. Informed Consent forms document the clients' agreement to a proposed course of treatment based on receiving clear, understandable information about the treatments' potential benefits and risks. This finding was also noted during our prior monitoring review.

Recommendations

El Centro management:

1. **Repay DMH \$1,222.**
2. **Ensure that Assessments, Client Care Plans, and Progress Notes are completed in accordance with their DMH contract.**
3. **Ensure that Informed Consent is obtained and documented in the client's chart.**

STAFFING QUALIFICATIONS

Objective

Determine whether El Centro's treatment staff had the required qualifications to provide the services.

Verification

We reviewed the California Board of Behavioral Sciences' website and/or the personnel files for eight of El Centro's 24 treatment staff, who provided services to DMH clients during November and December 2011.

Results

Each employee reviewed had the qualifications required to provide the billed services.

Recommendation

None.

PRIOR YEAR FOLLOW-UP**Objective**

Determine the status of the recommendations reported in the prior Auditor-Controller monitoring review.

Verification

We verified whether El Centro had implemented the four recommendations from our August 10, 2010 monitoring review covering Fiscal Year 2008-09.

Results

El Centro did not implement the two recommendations from the prior monitoring report. As previously indicated, the outstanding findings relate to Recommendations 2 and 3 in this report.

Recommendation

Refer to Recommendations 2 and 3.



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February 15, 2013

Wendy L. Watanabe
Auditor-Controller
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Ms Watanabe:

El Centro del Pueblo appreciates the guidance and feedback that was provided by Nina Johnson, LMFT during our audit and acknowledges the issues that were raised during the audit.

We wish to acknowledge the specific areas of concern and the steps we are taking to ensure that in the future we reduce the risk of having these issues persist.

- **Recommendation #1:** Repay DMH\$1222.
 - El Centro del Pueblo will repay this amount to LA County Department of Mental Health
- **Recommendation #2:** Ensure that assessments, client care plans, and progress notes are completed in accordance with the DMH contract
 - **Assessment & Client Care Plans:** Each assessment will be reviewed carefully by supervisory staff to ensure that the client symptoms and behaviors are consistent with the DSM to support the diagnosis. Once the supervisor confirms that there is alignment between the assessment and the diagnosis, the assessment will be approved. The Head of Service will be consulted if issues persist so that the diagnosis can be re-evaluated and revised if necessary and so that the content of the assessment is congruent with the diagnosis. Supervisors will utilize the decision trees in the DSM, their own background and expertise as clinicians trained in this field to fulfill this task. The supervisor will also review the identified objectives in the client care plans to ensure that these are focused on the treatment of specific symptoms and behaviors detailed in the assessment. The client care plans will reflect SMART objectives in order to ensure that these are clear to the

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- client and caregiver (if applicable). It will be the supervisor's responsibility to review these and to monitor, through individual supervision, whether these objectives are aligned with contractual requirements and sound clinical practice.
- We will continue our practice of requiring that all initial assessments and client care plan goals and objectives be presented during our group supervision in order to discuss and make recommendations about the alignment of symptoms/problem behaviors and the client's diagnosis. The expectation is that if recommendations are made the clinician will promptly make these revisions and the supervisor will ensure, through the review of the assessment document and the CCCP, that such has occurred. Once this has occurred the assessment and CCCP will be approved.
 - We have also ensured that our electronic health record system provides the clinician, on every progress note template, the specific treatment objectives detailed in the CCCP in order to ensure that the clinician/case manager addresses the appropriate objective in every clinical interaction.
 - We will schedule a specific training for all clinical staff and interns during March 2013 to review the "clinical loop" process, the specific language to be used in treatment objectives to ensure SMART objectives and clear mechanisms to ensure alignment between presenting symptoms and problems, mental status, and clinical history that will help ensure the assessment supports the diagnosis and helps guide the establishment of treatment objectives.
- Recommendation # 3: Ensure that Informed Consent is obtained in the client's chart.
 - The audit review found that clients who received medication support services were not appropriately and adequately questioned about side effects, or that client's compliance with medication regimen was clarified.
 - We have identified a very specific activity that failed to occur in the cases cited which has been immediately rectified in the following manner:
 - The Head of Service has spoken to our staff psychiatrist and ensured that he:
 - Understands the specific requirement and the specific form he is to use to ensure that this issue does not re-occur.

- Has been provided with an appropriate document/medication review form which he is to complete and discuss promptly and consistently with all clients and caregivers (when appropriate) when psychotropic medication is prescribed to address client's symptoms and behaviors.
- We have also ensured that our electronic health record tool includes a default mechanism in the medication support progress notes to prompt the psychiatrist to respond to this specific issue whenever the psychiatrist makes the clinical decision to prescribe medication to any El Centro del Pueblo clients.

In addition to these steps, the Head of Service has established and communicated quality control mechanisms within the program to ensure that clinical reviews and audits of client records are reviewed randomly on a biweekly basis. A specific audit review tool is utilized as a quality assurance mechanism that is applied to these client records in order to ensure compliance with contract requirements.

We remain open to any and all future opportunities for assistance and support from the Auditor Controller's office to ensure that we correct these issues. In our response to the previous audit conducted on April 28/ 2010 we had indicated that we were open to the invitation extended by Sukeida Day, LCSW to facilitate additional assistance and support in order to ensure future full compliance with all aspects of our contract.

Sincerely,



Sandra Figueroa Villa,
Executive Director